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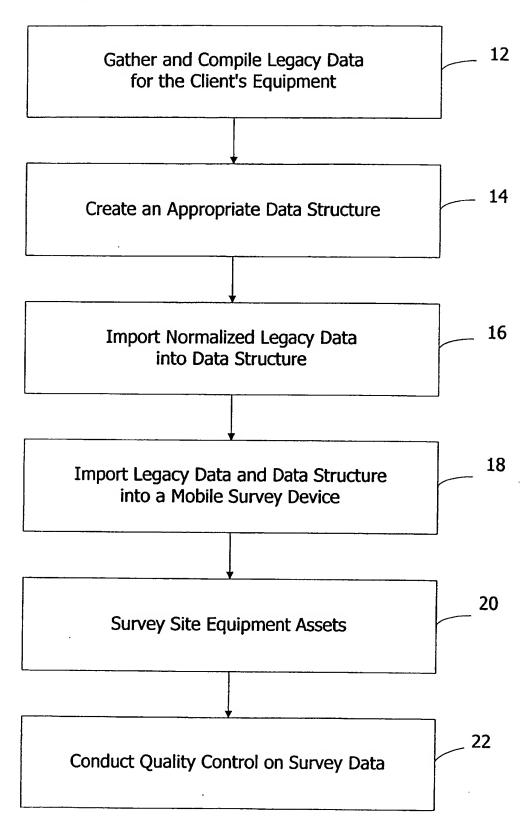
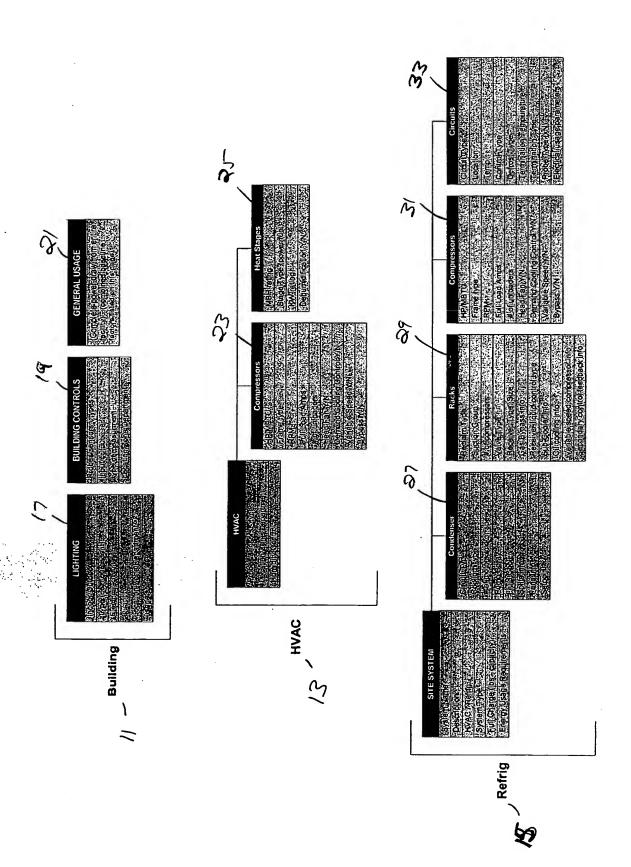
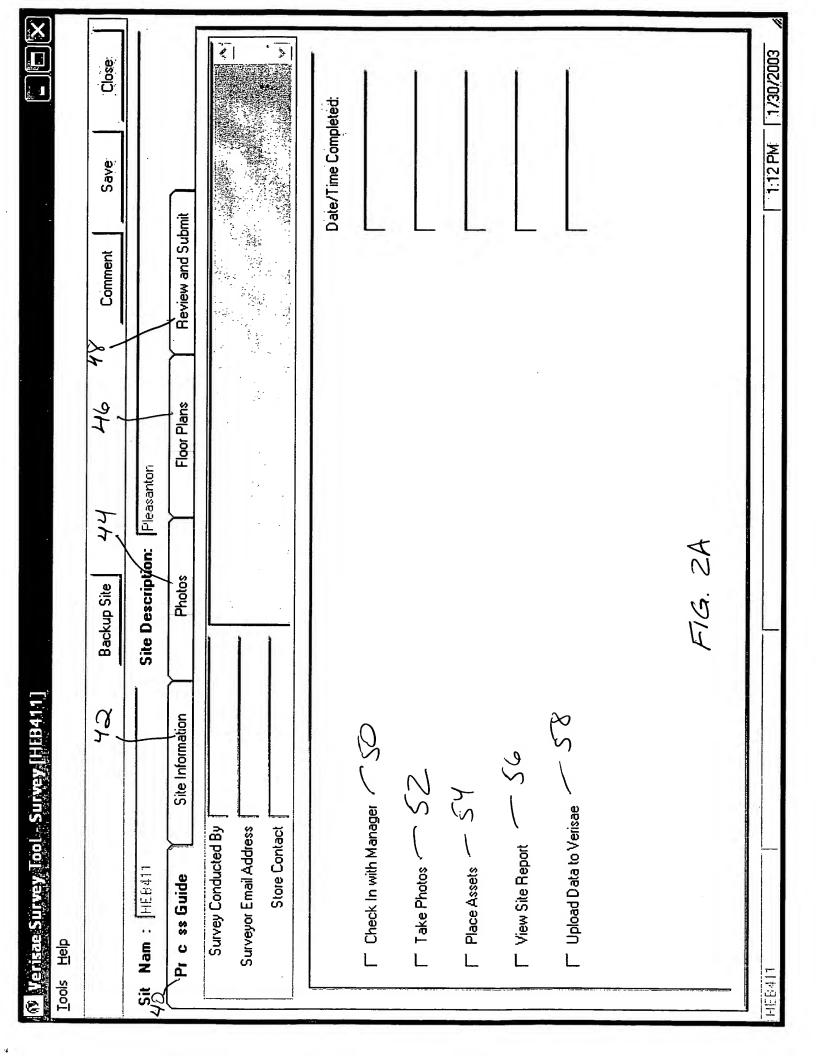


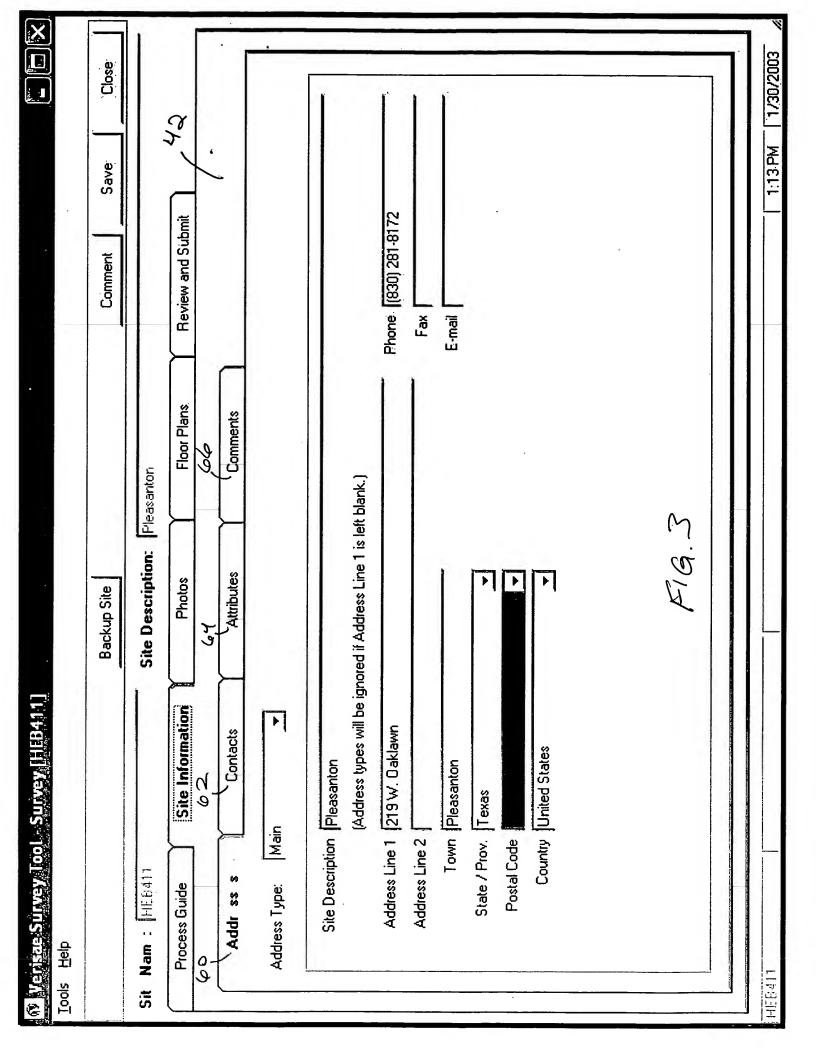
FIG. 1

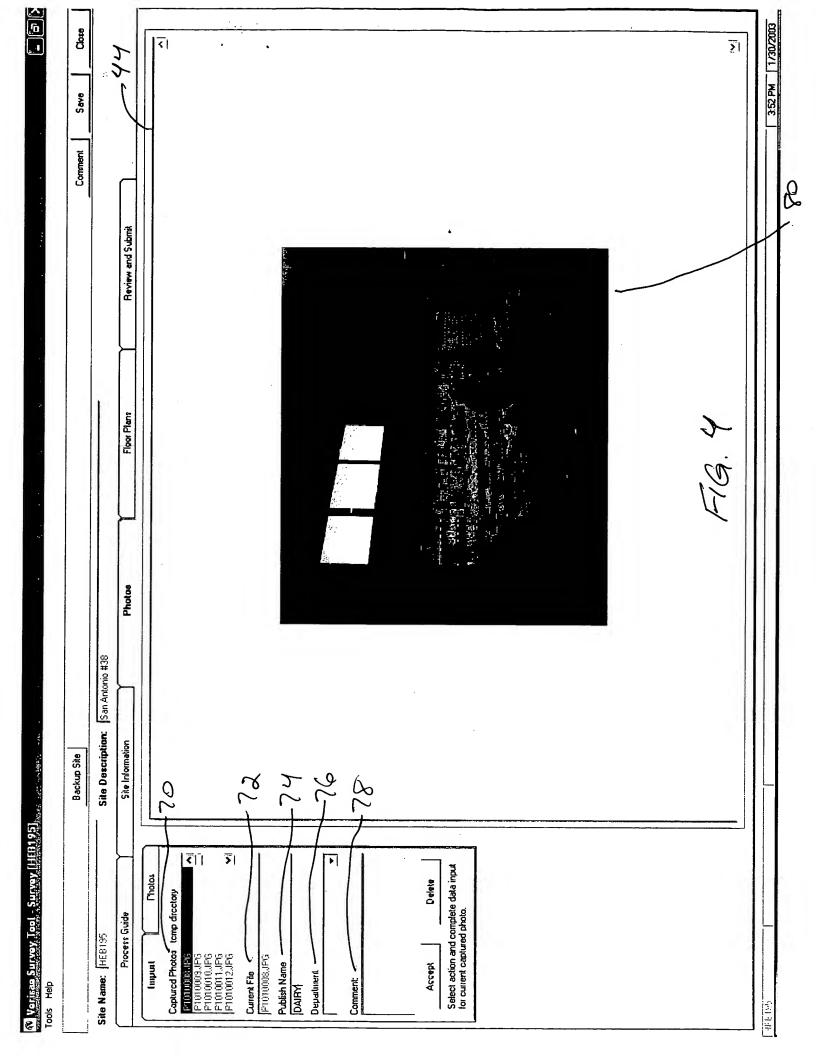


Stellate LOCATION FORMAT TYPE REFRIGERATED CIRCUITS **ELECTRICAL CIRCUITS DEPARTMENTS** CUSTOM ATTRIBUTES (I.E. SIGNAGE TYPES, QTY OF PARKING SPOTS, DEMOGRAPHICS, WIRELESS LAN PRESENT, ETC. 37 PANORAMIC/360 DEG PHOTOS AT STRATEGIC INTERNAL AND EXTERNAL LOCATIONS STILL PHOTOS OF VARIOUS AREAS (I.E. PLANT ROOM, ROOF, DEPARTMENTS, EXERNAL SIGNAGE, ETC.) 39 Equipment Dates BARCODE TAG # **ASSET CATEGORY** ASSET TYPE MODEL MANUFACTURER DEPARTMENT LOCATED IN ASSOCIATED REFRIGERATED CIRCUIT LOCATION ON FLOORPLAN CUSTOM ATTRIBUTES (I.E. CONTENTS, COLOR, LINEAR FOOTAGE, ETC.

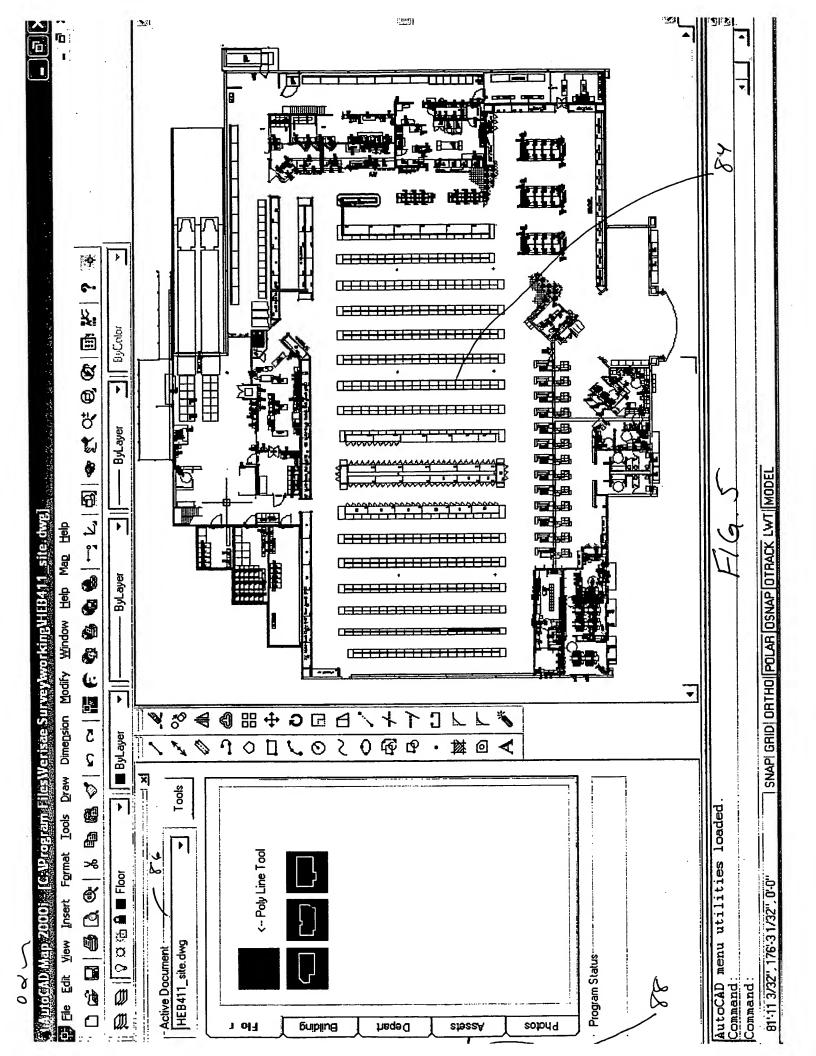
Set goals and objectives Take photos at site Collect information Specify location of assets Review information collected Upload information FIG. Z

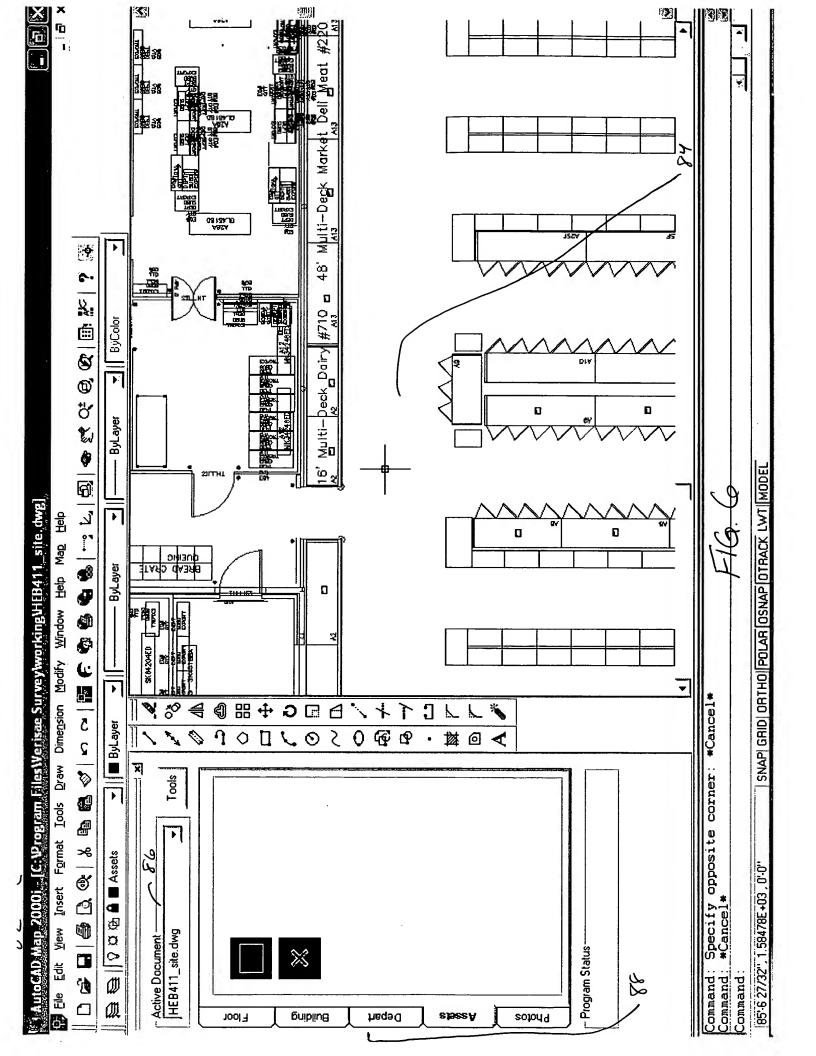


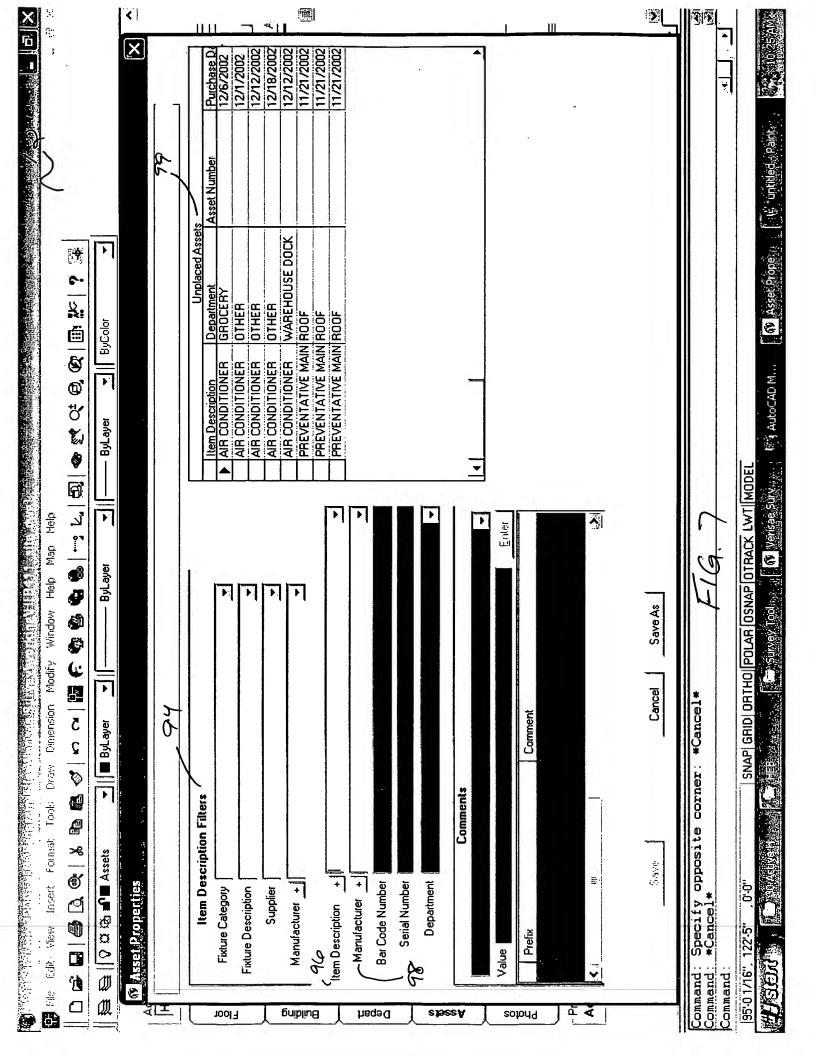


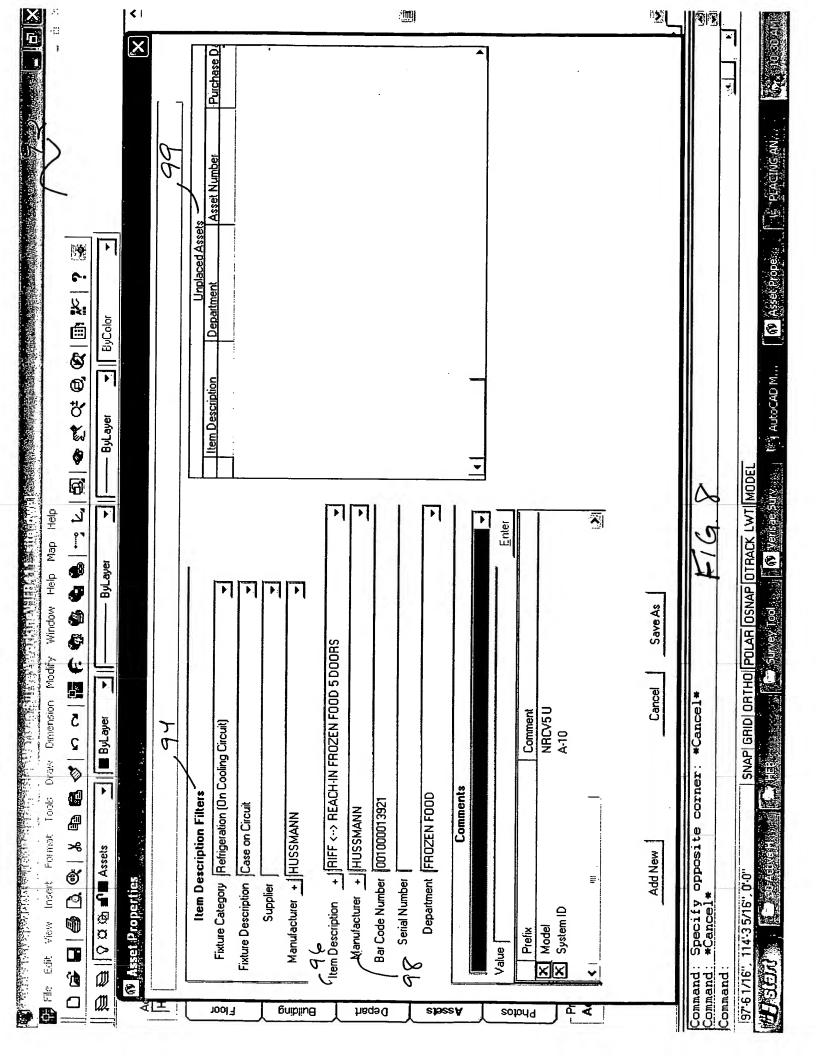


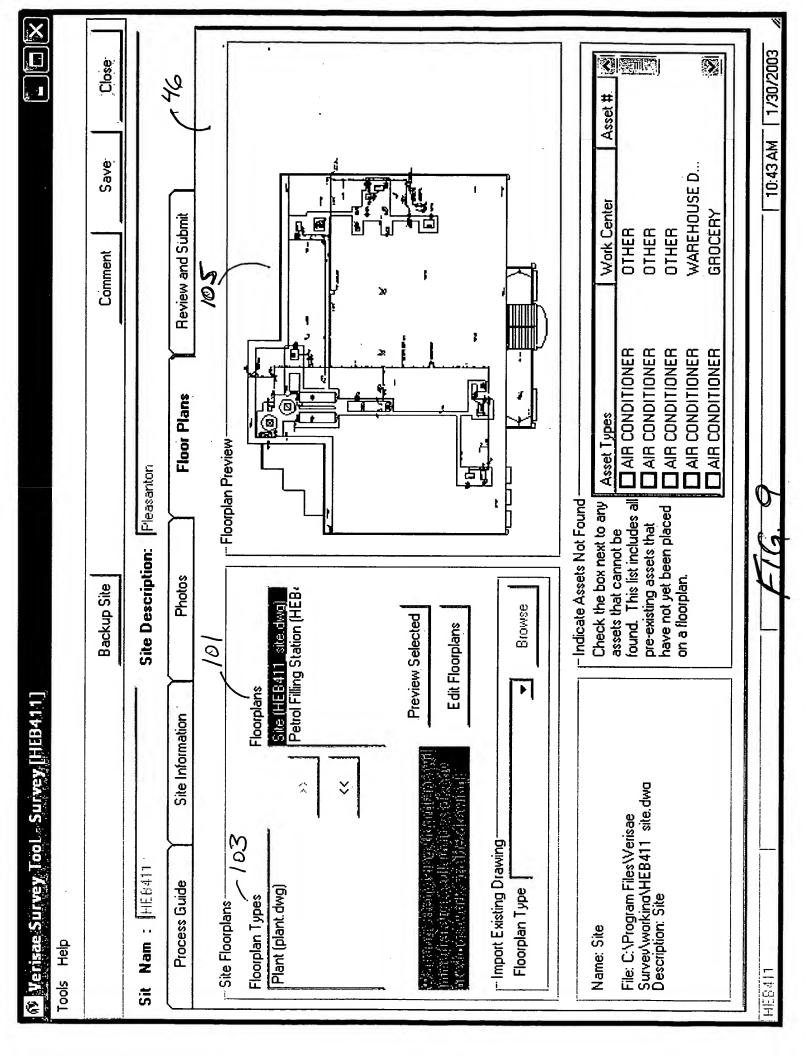
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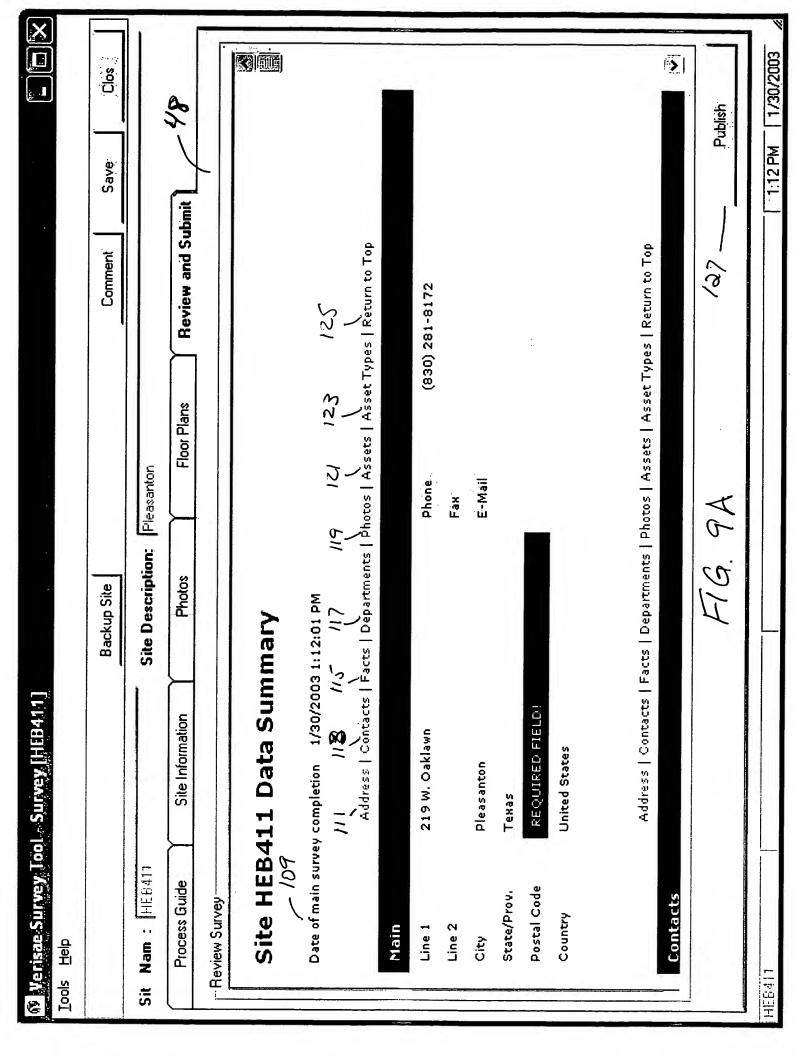


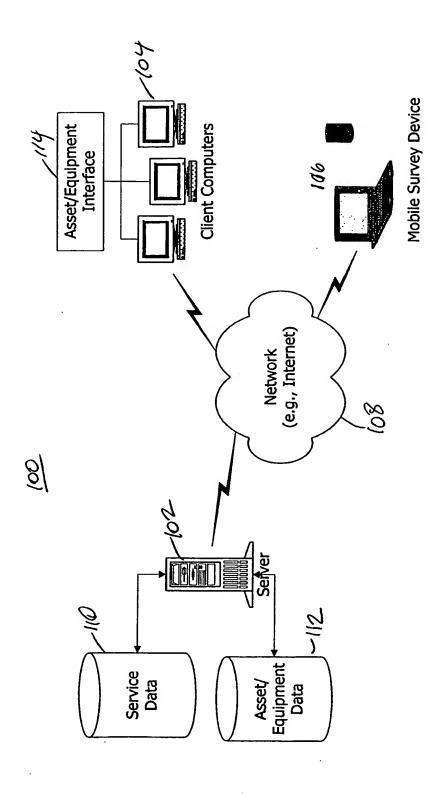






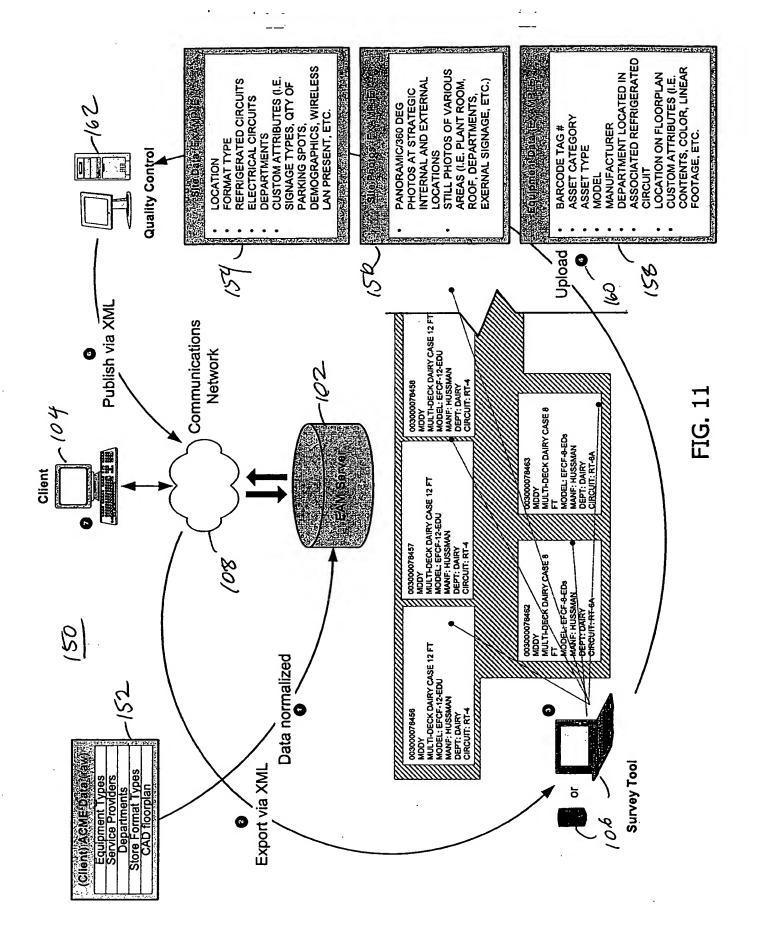






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Fig. 10



Offine objectives for survey 202

Create normalized lists of expected information

J

Allow for data structure adjustment during survey

200

Determine format of site

Determine logistics of executing Survey

212

Determine logistics of executing 316

Determining expectations related to equipment 220 Determining expectations related to site format Octermining expectations related to photographs 224 226 Determining expectations related to tasks for survey personnel

206 Allow for entry of information 335 not provided for in data Structure Identification of any information that does not fit within the data structure Adjust data structure to account for such information in the ficture

300 Collect store information Collect system identification 306 Collect system information 308 Collect rack information 310 Add comments

SITE REFRIGERATION SYSTEMS SURVEY FORM (FORM 1)

Store #	Date Surveyed	Contractor Group	Te	echnician Name:	
Store Address		EPA Certification#:	Te	echnician Phone #:	
System Information	1			1	
eff. Godding	HVAC Commerci	cial Refrigeration			
and Carlinde	Onsite Documentation	Calculation Measurement	Manufacturer's	Information (Established Range)	
Fill diene Seers en					
egen we	R-12 R-22 R-1	34A R-401A R-402A R-40 (MP39) (HP-80) (HP-		02 R-507 Other	
Sidentinus	Normal Operation	Operating Under Extension Shu	down Retrofit in P	rogress	
System Configuration	Rack (R) Single	Unit (U) Self-Contained (SC)	Air Conditioner (AC)	Other (O)	
System Type	Low Temp (LT)	Medium Temp (MT)			
On-Site Charge Documentation	32 - 1 (11) 10 1분 전 : 16 (1원사기				
System Description (incl. Area or Fixtures s	erved)				
Rack Information (a	as needed)		mercesors 4402		1 11-11-11-11
Rack Manufacturer			mpressor nufacturer	Model #	HP
Receiver Volume (L*π*	R²) (fl³)				
1. Full Charge Determir Order.	(1) Onsite Documenta (3) Measurement, (4) (Established Range)	tion, (2) Calculation, Manufacturer's Information			
2. Full Charge Formula	s: Rack: [Receiver Volu	me (ft³) * Density * 1.5]			
	Single Unit or Self-Co [Total Horsepo				
Density per Refrigerant		5.77), R-134A (77.44), 2A (74.67), R-404A (68.11), 2 (74.67), R-507 (64.92)			
				Total Horsepower →	
omments:					



400

Collect on-site refrigerant inventory information

SITE REFRIGERATION SYSTEMS SURVEY FORM (FORM 1A)

Store #	Date Surveyed	Contractor Group	Technician Name:
Store Address		EPA Certification#:	Technician Phone #:

				Rei	Refrigerant Type	be				· Reclaim	Reclaimed		Cylinder Size		Chi	Charge	Cylinder ID
R-12	R-22	R-134A	R-401A (MP-39)	R-402A (HP-80)	A R-404A) (HP-62)	R-408A	R-502	R-507	R-507 Other	Yes	No 30#	# 20#	125#	1000#			
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14															Empty %	Empty % % Full	
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20								-									



450 Collect store information Collect system information 456 Collect service information 458 Collect-Fechnician comments

REFRIGERANT USAGE LEAK CHECK / REPAIR REPORT (FORM 2)

	l l	R ceived
		k Rate Acceptable? (Y/N)
Store #		
Site System		
Refrigerant Type	R-12 R-22 R-134A R-401A R-402A R-404A R-4 (MP39) (HP-80) (HP-62)	108A R-502 R-507 Other:
Amount Added (lbs.)		
Amount Recovered (lbs.)		
Date of Service		
Service Reference # (Work Order # - assigned by Division)		
Leak Status	NA Leak Repaired Repaired Attempted	
echnician Comments		
Exact leak location(s), se specific:		
No; Describe why	o leaks were identified or repaired during this service and note dates anticipated for completion: ak repair methods	
•	cle one): bubble electronic/ultrasonic press If yes, date scheduled:	sure evacuation dye injed
Additional comments:	, , , , , , , , , , , , , , , , , ,	
Complete the following: I cel	rtify, based on my sound professional judgment and verif repaired in accordance with EPA Regulation 40 CFR Par	ication testing as appropriate, the
Signature:	(Same technician as identified b	elow)
		·
echnician Name:(Print	Phone Number#	

FI

Signature:

copy of this form in the designated store "Refrigerant Tracking Report" folder.

Store Director Printed Name (or other designated store manager):

FIG. 21

repaired at time of service, contact your designated Maintenance Department for further direction to ensure proper follow-up occurs. File a

Date: _____

Convert data into format compatible with server 462 Move all data and files to the server E Convert the data at the server 466 Add additional linkages between

460

Locate asset

in legacy list

If cannot locate,
ald asset to
database

Input all attributes 606 of asset into database

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F1G. 25

634

	図 Attribute	Removes Sales	Attribute Attribute Attribute Attribute Attribute	All Steps Completed RaceAsset
Asset Attributes Fill out all attribute fields.	-Bumper Color - Condition Shelf Type Shelf Dimensions		Attribute Attribute Attribute Attribute	All required fields have been filled.

F1G. 26